

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	A.R.A.M		09-09-01
O.I.P.E. CLASSIFIER		59	9/1/91
FORMALITY REVIEW	LC	1024	10/3/01
RESPONSE FORMALITY REVIEW	Request	925	11-14-01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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 10/3  
 11/4/01  
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